February 6, 2004

Mr. Pat McNamara Bunge North America P.O. Box 1002 Decatur, Indiana 46733

> Re: 001-18591-00005 First Administrative Amendment to Part 70 T 001-5610-00005

Dear Mr. McNamara:

Central Soya Company was issued a permit on July 3, 2002 for a stationary grain handling, animal feed production, soybean meal production and soybean oil extraction plant . A letter requesting a transfer of ownership was received January 12, 2004. Pursuant to the provisions of 326 IAC 2-7-11(a)(4) the permit is hereby administratively amended as follows:

Effective December 31, 2003, Bunge North America (East), Inc. (f.k.a. Central Soya Company, Inc., merged with and into a new Delaware limited liability company called Bunge North America (East), LLC. The new limited liability company will be the surviving company for the combined entities and will hold all assets, licenses, etc., of Bunge North America (East), Inc.

The appropriate reporting forms were updated to reflect the new operating name of Bunge North America.

All other conditions of the permit shall remain unchanged and in effect. Please attach a copy of this amendment to the front of the original permit.

This decision is subject to the Indiana Administrative Orders and Procedures Act - IC 4-21.5-3-5. If you have any questions on this matter, please contact Gary Freeman, of my staff, at 317-233-5334 or 1-800-451-6027, ask for extension 3-5334.

Sincerely,

Original signed by Paul Dubenetzky, Chief Permits Branch Office of Air Quality

Attachments: Updated Pages

PD/gkf

cc: File - Adams County

Adams County Health Department Air Compliance Section - Ryan Hillman Compliance Data Section

Permit Review Section 1 - Gary Freeman

Air Programs - Chet Bohannon

PART 70 OPERATING PERMIT OFFICE OF AIR QUALITY

Bunge North America 1200 North 2nd Street Decatur, Indiana 46733

(herein known as the Permittee) is hereby authorized to operate subject to the conditions contained herein, the source described in Section A (Source Summary) of this permit.

This permit is issued in accordance with 326 IAC 2 and 40 CFR Part 70 Appendix A and contains the conditions and provisions specified in 326 IAC 2-7 as required by 42 U.S.C. 7401, et. seq. (Clean Air Act as amended by the 1990 Clean Air Act Amendments), 40 CFR Part 70.6, IC 13-15 and IC 13-17.

Operation Permit No.: T001-5610-00005	
Issued by: Janet G. McCabe, Assistant Commissioner Office of Air Quality	Issuance Date: July 3, 2002 Expiration Date: July 3, 2007

First Administrative Amendment: 001-18591-00005	Pages Affected: 64, 65, 66, 67, 68, 69, 70 and 71
Issued by: Original signed by Paul Dubenetzky, Branch Chief Office of Air Quality	Issuance Date: February 6, 2004

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INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY

PART 70 OPERATING PERMIT CERTIFICATION

This certification shall be included when submitting monitoring, testing reports/results

Source Name: Bunge North America

Source Address: 1200 North 2nd Street, Decatur, Indiana 46733 Mailing Address: P.O. Box 1002, Decatur, Indiana 46733

Part 70 Permit No.: T001-5610-00005

or other documents as required by this permit.	
Please check what document is being certified:	
9 Annual Compliance Certification Letter	
9 Test Result (specify)	
9 Report (specify)	
9 Notification (specify)	
9 Affidavit (specify)	
9 Other (specify)	
I certify that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.	on
Signature:	
Printed Name:	
Title/Position:	
Phone:	
Date:	

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY

COMPLIANCE BRANCH 100 North Senate Avenue P.O. Box 6015 Indianapolis, Indiana 46206-6015 Phone: 317-233-5674 Fax: 317-233-5967

PART 70 OPERATING PERMIT EMERGENCY OCCURRENCE REPORT

Source Name: Bunge North America.

Source Address: 1200 North 2nd Street, Decatur, Indiana 46733 Mailing Address: P.O. Box 1002, Decatur, Indiana 46733

Part 70 Permit No.: T001-5610-00005

This form consists of 2 p	age	es
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Page 1 of 2

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This is an emergency as defined in 326 IAC 2-7-1(12)

- C The Permittee must notify the Office of Air Quality (OAQ), within four (4) business hours
 - (1-800-451-6027 or 317-233-5674, ask for Compliance Section); and
- C The Permittee must submit notice in writing or by facsimile within two (2) days
 - (Facsimile Number: 317-233-5967), and follow the other requirements of 326 IAC 2-7-16.

If any of the following are not applicable, mark N/A

Facility/Equipment/Operation:

Control Equipment:

Permit Condition or Operation Limitation in Permit:

Description of the Emergency:

Describe the cause of the Emergency:

f any of the following are not applicable, m	nark N/A	Page 2 of 2
Date/Time Emergency started:		
Date/Time Emergency was corrected:		
Was the facility being properly operated a Describe:	at the time of the emergency? Y N	
Type of Pollutants Emitted: TSP, PM-10,	SO ₂ , VOC, NO _X , CO, Pb, other:	
Estimated amount of pollutant(s) emitted	during emergency:	
Describe the steps taken to mitigate the	problem:	
Describe the corrective actions/response	steps taken:	
Describe the measures taken to minimiz	e emissions:	
	ontinued operation of the facilities are necessar ge to equipment, substantial loss of capital inve economic value:	
Form Completed by:		
Title / Position:		
Date:		
Phone:		

A certification is not required for this report.

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Bunge North America Decatur, Indiana Permit Reviewer: ERG/KC

Source Name:

Phone:

Date:

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY COMPLIANCE DATA SECTION

PART 70 OPERATING PERMIT SEMI-ANNUAL NATURAL GAS FIRED BOILER CERTIFICATION

Bunge North America

Mailing	Address: Address: Permit No.:	1200 North 2 nd Street, Decatur, Indiana 46733 P.O. Box 1002, Decatur, Indiana 46733 T001-5610-00005		
9 9	Natural Gas Alternate Fu From:	·		
I certify that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.				
Signa	ture:			
Printe	d Name:			
Title/F	Position:			

A certification by the responsible official as defined by 326 IAC 2-7-1(34) is required for this report.

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Bunge North America Decatur, Indiana Permit Reviewer: ERG/KC

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY COMPLIANCE DATA SECTION

Part 70 Quarterly Report

Source Name:	Bunge North America
Source Address:	1200 North 2 nd Street, Decatur, Indiana 46733
Mailing Address:	P.O. Box 1002, Decatur, Indiana 46733
Part 70 Permit No.:	T001-5610-00005
Facility:	Oil Extraction Facilities
Parameter:	Hexane Usage
Limit:	Less than 330,000 gallons per year

YEAR:		

Month	Column 1	Column 2	Column 1 + Column
	This Month	Previous 11 Months	12 Month Total
Month 1			
Month 2			
Month 3			

9	No deviation	n occurred in this quarter.
9		occurred in this quarter. as been reported on:
	omitted by: e / Position:	
Sign	nature:	
Date		
Pho	ne:	

Attach a signed certification to complete this report.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY COMPLIANCE DATA SECTION

Part 70 Quarterly Report

Source Name:	Bunge North America
Course Harrie.	Dange Heran / amenea

Source Address: 1200 North 2nd Street, Decatur, Indiana 46733 Mailing Address: P.O. Box 1002, Decatur, Indiana 46733

Part 70 Permit No.: T001-5610-00005

Facility: Grain Processing Facilities

Parameter: Soybean grain processed after the grain dryers

Limit: Less than 1,368,750 tons per year

YEAR: _____

Month	Column 1	Column 2	Column 1 + Column
	This Month	Previous 11 Months	12 Month Total
Month 1			
Month 2			
Month 3			

9	No	deviation	occurred	in	this	quarte	r.
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9	Deviation/s occurred in this quarter.
	Deviation has been reported on:

Submitted by:	
Title / Position:	
Signature:	
Date:	
Phone:	

Attach a signed certification to complete this report.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF AIR QUALITY COMPLIANCE DATA SECTION

PART 70 OPERATING PERMIT QUARTERLY DEVIATION AND COMPLIANCE MONITORING REPORT

Source Name: Bunge North America 1200 North 2nd Street, Decatur, Indiana 46733 Source Address: Mailing Address: P.O. Box 1002, Decatur, Indiana 46733 Part 70 Permit No.: T001-5610-00005 Months: _____ to ____ Year: _____ Page 1 of 2 This report is an affirmation that the source has met all the requirements stated in this permit. This report shall be submitted quarterly based on a calendar year. Any deviation from the requirements, the date(s) of each deviation, the probable cause of the deviation, and the response steps taken must be reported. Deviations that are required to be reported by an applicable requirement shall be reported according to the schedule stated in the applicable requirement and do not need to be included in this report. Additional pages may be attached if necessary. If no deviations occurred, please specify in the box marked "No deviations occurred this reporting period". 9 NO DEVIATIONS OCCURRED THIS REPORTING PERIOD. 9 THE FOLLOWING DEVIATIONS OCCURRED THIS REPORTING PERIOD **Permit Requirement** (specify permit condition #) Date of Deviation: **Duration of Deviation:** Number of Deviations: **Probable Cause of Deviation:** Response Steps Taken: Permit Requirement (specify permit condition #) Date of Deviation: **Duration of Deviation:** Number of Deviations: **Probable Cause of Deviation:** Response Steps Taken:

Page 2 of 2

Permit Requirement (specify permit condition #)	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation:	Duration of Deviation:
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Permit Requirement (specify permit condition #)	
Date of Deviation: Duration of Deviation:	
Number of Deviations:	
Probable Cause of Deviation:	
Response Steps Taken:	
Form Completed By:	
Title/Position:	
Date:	
Phone:	

Attach a signed certification to complete this report.